

[illegible]

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-001080		STN# 06		PRIMAR YES															
ON OR BETWEEN																													
MM/DD/YY 08/21/2015		MM/DD/YY 08/21/2015		MM/DD/YY 08/21/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-001080		BURGLAR FORCE NO F.															
TIME 01:50		DAY OF WEEK FRID		TIME 02:05		DAY OF WEEK FRID		TIME 02:05		DAY OF WEEK FRID		ADDRESS / LOCATION OF INCIDENT 701 CERRILLOS ROAD				CITY SANTA FE		CTY. 01		ZIP 87506		GANG REL. YES NO		HATE / BIAS MOT. CODE					
OFFENSE / INCIDENT		STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING		ALCOH.		DRUG		COMP.	
		1		WARRANT SERVICE		SFPD-03		M		C		90Z		NO		NO		NO		26		01		NO		NO		NO	
PERSON CODES		V-VICTIM		V-WITNESS		D-OTHER		TYPE CODES		A-POLICE		O-OTHER		INJURY CODES		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE			
G-PARENT/GUARDIAN		C-CITED		D-DECEASED				I-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		H-HISPANIC/MEXICAN		C-CHINESE		O-OTHER					
R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/		A-ARRESTED		B-BUSINESS		R-RELIGIOUS				I-POSSIBLE INTERNAL INJURY		O-OTHER MAJOR INJURY		N-NONE		J-JAPANESE		I-INDIAN/NATIVE AMERICAN		O-OTHER					
INTERVIEWED				RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PIB				U-SEVERE LACERATION		T-LOSS OF TEETH													
PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																							
A		I		N		BOBBY																							
STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																			
HOMELESS				SANTA FE		01		NM		87506																			
RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE		WHT		BLK		ASA		IND		UNK							
M																													
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.					
5' 07"		190 LBS		BRO		BRO																							
PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																							
STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																			
RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE		WHT		BLK		ASA		IND		UNK							
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.					
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE															
SUSPECTED DRUG TYPE																													

OCCURRENCE DATE(S)								
ON OR BETWEEN								
DATE REPORTED								
SANTA FE POLICE DEPARTMENT HOT SHEET								
ORI NO.								
INCIDENT NO.								
STN#								
YES								
MM/DD/Y			MM/DD/Y			AGENCY		
08/23/2015			08/23/2015			SANTA FE PD		
GEOGR. CODE			CASE NUMBER			BURGLAR FORCE		
01075			15-000597			NO F.		
TIME			DAY OF WEEK			HATE / BIAS MOT. CODE		
22:07			SUN			00		
ADDRESS / LOCATION OF INCIDENT								
CITY								
CTY.								
ZIP								
2640 AGUA FRIA STREET								
SANTA FE								
01								
87505								
OFFENSE / INCIDENT								
STATUTE OR ORDINANCE								
FEL./ MISD.								
ATTEMPTED/ COMPLETED								
UCR OFFENSE CODE								
DOM. VIOL.								
SEX CRIME?								
CHILD								
CRIMINAL ACTIVITY CODE								
LOCAT. CODE								
WEAPON CODE UP TO 3 PER OFFENSE								
OFFENDER(S) SUSPECTED OF USING								
ALCOH.								
DRUG								
COMP.								
WARRANT SERVICE								
SFDPD-03								
N								
C								
90Z								
NO								
NO								
NO								
13								
01								
NO								
NO								
NO								
PERSON CODES								
V-VICTM C-CITED W-WITNESS D-DECEASED O-OTHER								
G-PARENT/GUARDIAN R-RAPPORTING PERSON H-HINTERVIEWED S-SUSPECT A-ARRESTED M-MISSING PERSON/ RUNAWAY								
TYPE CODES								
I-INDIVIDUAL G-GOVERNMENT U-UNKNOWN B-BUSINESS R-RELIGIOUS F-FINANCIAL INST. S-SOCIETY/PUB								
INJURY CODES								
B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION								
M-APPARENT MINOR INJURY T-LOSS OF TEETH								
U-UNCONSCIOUSNESS N-NONE								
ETHNIC CODES								
A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE K-KOREAN/LATINO AMERICAN NATIVE AMERICAN								
PERSO N CODE TYPE CODE INJURY CODE								
1-NAME (LAST, FIRST, MIDDLE, SUFFIX)								
ESPINOZA								
GINGER								
M								
STREET ADDRESS								
APT. NO.								
CITY								
CTY.								
STATE								
ZIP								
14 CALLE CAPULIN								
SANTA FE								
01								
NM								
87507-0000								
RES. PHONE								
BUS. PHONE								
SOCIAL SECURITY NO.								
DOB								
AGE								
SEX								
RACE								
(505) 603-3291								
(505) 603-3291								
HEIGHT								
WEIGHT								
HAIR								
EYES								
ETHNIC								
AGG. ASSAULT JUST. HOM. CODE								
VIC TM OF OFF. NO.								
VIC TM OF SUSP. NO.								
REL.								
VIC TM OF SUSP. NO.								
REL.								
VIC TM OF SUSP. NO.								
REL.								
PERSO N CODE TYPE CODE INJURY CODE								
1-NAME (LAST, FIRST, MIDDLE, SUFFIX)								
STREET ADDRESS								
APT. NO.								
CITY								
CTY.								
STATE								
ZIP								
RES. PHONE								
BUS. PHONE								
SOCIAL SECURITY NO.								
DOB								
AGE								
SEX								
RACE								
WHIT BLK ASIA IND UNK								
HEIGHT								
WEIGHT								
HAIR								
EYES								
ETHNIC								
AGG. ASSAULT JUST. HOM. CODE								
VIC TM OF OFF. NO.								
VIC TM OF SUSP. NO.								
REL.								
VIC TM OF SUSP. NO.								
REL.								
VIC TM OF SUSP. NO.								
REL.								
PROPERTY STATUS PROPERTY TYPE TYPE OF ITEM MAKE / BRAND MODEL CALIBER VALUE DRUG VALUE								
SUSPECTED DRUG TYPE QUANTITY UNIT OF MS. DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) SERIAL / OAN DATE RECOVERED N.I.C. NO.								
PROPERTY STATUS PROPERTY TYPE TYPE OF ITEM MAKE / BRAND MODEL CALIBER VALUE DRUG VALUE								
SUSPECTED DRUG TYPE QUANTITY UNIT OF MS. DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) SERIAL / OAN DATE RECOVERED N.I.C. NO.								
YEAR MAKE MODEL BODY STYLE LICENSE NO. LIC. YEAR LIC. ST. TOP COLOR BTM. COLOR								
VALUE / DAMAGE EST.								
SYNOPSIS SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)								
ON SUNDAY, 08/23/2015, AT APPROXIMATELY 2207 HOURS, I CAME INTO CONTACT WITH GINGER ESPINOZA, AND I SUBSEQUENTLY ARRESTED HER ON FIRST JUDICIAL DISTRICT COURT WARRANT #D-0101-CR-201500172 FOR FAILURE TO APPEAR. THE SIGNING JUDGE IS T. GLENN ELLINGTON, AND THE BOND IS SET \$2,500.00 CASH ONLY. THE ARRESTED WAS NOT CARING FOR A CHILD AT THE TIME OF ARREST.								
CERT./STATUS								
"I WILL PROSECUTE/Testify SHOULD THE OFFENDER BE ARRESTED."								
YES NO								
"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."								
COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X								
DATE								
REPORTING OFFICER (PRINT)								
RANK								
I.D. NO.								
DATE								
DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO								
I.D. NO.								
DATE								
ASSISTING OFFICER (PRINT)								
RANK								
I.D. NO.								
DATE								
PROCESSED BY								
DATE								
DATA ENTRY PERSON								
DATE								
APPROVING OFFICER (PRINT)								
RANK								
I.D. NO.								
DATE								
ACTIVE INCAT. CLOSED U.F. CLA. CL.E.								
EXCEPT CODE								
A-DEATH OF OFFENDER DECLINED B-PROSECUTION DENIED C-EXTRADITION DENIED D-VICTIM REF.T.O COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE								
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) CASES CLEARED BY THIS ARREST CASE NO. CASE NO. CASE NO.								

OCCURRENCE DATE(S)			DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO.	INCIDENT NO.	STN#	PRIMAR									
ON OR BETWEEN									NM0260100	15-012445	02	YES									
MM/DD/YY	MM/DD/YY	MM/DD/YY	AGENCY				GEOGR. CODE	CASE NUMBER	BURGLAR FORCE NO F		NO. OF UNITS ENT.										
08/23/2015	08/23/2015	08/23/2015	SANTA FE PD				01075	15-012445	<input type="checkbox"/> YES <input type="checkbox"/> NO												
TIME	DAY OF WEEK	TIME	DAY OF WEEK	TIME	DAY OF WEEK	ADDRESS / LOCATION OF INCIDENT			CITY	CTY.	ZIP	GANG REL. YES NO	HATE / BIAS MOT. CODE								
02:59	SUN	04:01	SUN	02:59	SUN	2218 MIGUEL CHAVEZ #815			SANTA FE	01	87507	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	00								
OFFENSE	OFFENSE / INCIDENT					STATUTE OR ORDINANCE	FEL/ MISD.	ATTEMPTED/ COMPLETED	UCR OFFENSE CODE	DOM. VIOL.	SEX CRIME?	CHILD	CRIMINAL ACTIVITY CODE	LOCAT. CODE	WEAPON CODE UP TO 3 PER OFFENSE	OFFENDER(S) SUSPECTED OF USING					
	1 AGGRAVATED BATTERY AGAINST A HOU					30-3-16	F	C	13A	YES	NO	NO		20	12		YES	UNK	NO		
	2 FALSE IMPRISONMENT					30-4-3	F	C	90Z	YES	NO	NO		20	12		YES	UNK	NO		
	3 ABANDONMENT OR ABUSE OF A CHILD					30-6-1	F	C	90Z	YES	NO	YES		20	12		YES	UNK	NO		
	4 ABANDONMENT OR ABUSE OF A CHILD					30-6-1	F	C	90Z	YES	NO	YES		20	12		YES	UNK	NO		
	5 TAMPERING WITH EVIDENCE					30-22-5	F	C	90Z	YES	NO	NO		20	12		YES	UNK	NO		
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES		V-VICTIM	W-WITNESS	O-OTHER	TYPE CODES		R-POLICE	O-OTHER	INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE					
	G-PARENT/GUARDIAN		C-CITED	D-DECEASED		I-INDIVIDUAL		G-GOVERNMENT	O-UNKNOWN	B-APPARENT BROKEN BONE		B-BLACK		C-CHINESE		O-OTHER					
	R-REPORTING PERSON		S-SUSPECT	M-MISSING PERSON/		B-BUSINESS		R-RELIGIOUS		M-APPARENT MINOR INJURY		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN					
	H-INTERVIEWED		A-ARRESTED	R-RUNAWAY		F-FINANCIAL INST.		S-SOCIETY/PUB		T-LOSS OF TEETH		I-AMERICAN INDIAN/NATIVE AMERICAN									
	PERSO N CODE	TYPE CODE	INJURY CODE	1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																	
	A	I	N	TAPIA JONATHAN R																	
	STREET ADDRESS					APT. NO.	CITY					CTY.	STATE	ZIP							
	2218 MIGUAL CHAVEZ					815	SANTA FE					01	NM	87507							
	RES. PHONE					BUS. PHONE					SOCIAL SECURITY NO.					DOB	AGE	SEX	RACE		
	(505) 920-9490																	M	WHT BLK ASIA IND UNK		
HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.				
5' 08"	180 LBS	BRO	BRO																		
PERSO N CODE	TYPE CODE	INJURY CODE	1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																		
STREET ADDRESS					APT. NO.	CITY					CTY.	STATE	ZIP								
RES. PHONE					BUS. PHONE					SOCIAL SECURITY NO.					DOB	AGE	SEX	RACE			
																		WHT BLK ASIA IND UNK			
HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.				
PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM			MAKE / BRAND			MODEL			CALIBER		VALUE		DRUG VALUE						
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)					SERIAL / OAN			DATE RECOVERED		N.I.C. NO.								
PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM			MAKE / BRAND			MODEL			CALIBER		VALUE		DRUG VALUE						
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)					SERIAL / OAN			DATE RECOVERED		N.I.C. NO.								
YEAR	MAKE	MODEL			BODY STYLE			LICENSE NO.		LIC. YEAR	LIC. ST.	TOP COLOR		BTM. COLOR							
1995	HOND				4D			207SLD		2015	NM	WHI		WHI							
VALUE / DAMAGE EST.																					
SYNOPSIS	ON SUNDAY, AUGUST 23RD, 2015, MR. JONATHAN R. TAPIA WAS ARRESTED AT THE ABOVE STATED LOCATION FOR THE LISTED CRIMINAL OFFENSES. SANTA FE POLICE OFFICERS CAME INTO CONTACT WITH MR. TAPIA THROUGH THE COURSE OF AN INVESTIGATION REGARDING A REPORTED DOMESTIC DISTURBANCE. MR. TAPIA WAS TRANSPORTED TO THE SANTA FE COUNTY ADULT DETENTION CENTER WHERE HE WAS BOOKED ACCORDINGLY WITHOUT FURTHER INCIDENT. MR. TAPIA'S TWO YEAR OLD DAUGHTER WAS PICKED UP BY THE CHILD'S GRANDMOTHER.																				
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES	NO	"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE					X		DATE							
	REPORTING OFFICER (PRINT)				RANK	I.D. NO.	DATE	DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO					I.D. NO.	DATE							
	PARRISH, JACOB				PO II	6884	08/23/2015														
	ASSISTING OFFICER (PRINT)				RANK	I.D. NO.	DATE	PROCESSED BY		DATE	DATA ENTRY PERSON			DATE							
	SGT. AARON ORTIZ				SGT	5679	08/23/2015														
APPROVING OFFICER (PRINT)				RANK	I.D. NO.	DATE	INCIDENT STATUS					EXCEPT CODE	DATE								
SGT. AARON ORTIZ				SGT	5679	08/23/2015	ACTIVE <input type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> C.L.A. <input type="checkbox"/> C.L.E. <input checked="" type="checkbox"/>					N	08/23/2015								
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)							CASES CLEARED BY THIS ARREST					CASE NO.			CASE NO.						
DA, INV, CYFD							CASE NO.					15-012445									

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO.		INCIDENT NO.		STN#		PRIMAR										
ON OR BETWEEN										NM0260100		15-012438		09		YES										
MM/DD/YY		MM/DD/YY		MM/DD/YY		AGENCY				GEOGR. CODE		CASE NUMBER		BURGLAR FORCE		NO. OF UNITS ENT.										
08/23/2015				08/23/2015		SANTA FE PD				01075		15-012438		<input type="checkbox"/> YES <input type="checkbox"/> NO												
TIME		DAY OF WEEK		TIME		DAY OF WEEK		ADDRESS / LOCATION OF INCIDENT				CITY		CTY.		ZIP										
01:00		SUN				SUN		804 ALARID				SANTA FE		01												
OFFENSE	OFFENSE / INCIDENT				STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING	
	1				SFPD-15		N		C		90Z		NO		NO		NO				05				ALCOH. DRUG COMP.	
	LOCATED MISSING PERSON																								UNK UNK NO	
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES				V-VICTIM		W-WITNESS		D-OTHER		TYPE CODES		I-POLICE		G-GOVERNMENT		O-OTHER		INJURY CODES		E-ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE	
	G-PARENT/GUARDIAN				C-CITED		D-DECEASED				I-INDIVIDUAL		G-GOVERNMENT		O-UNKNOWN				B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		C-CHINESE	
	R-REPORTING PERSON				S-SUSPECT		M-MISSING PERSON/				B-BUSINESS		R-RELIGIOUS						I-POSSIBLE INTERNAL INJURY		O-OTHER MAJOR INJURY		N-NONE		J-JAPANESE	
	H-INTERVIEWED				A-ARRESTED		RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PUB						L-SEVERE LACERATION		T-LOSS OF TEETH				U-UNKNOWN	
	PERSON N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																			
	M		I		N		COTA																			
	STREET ADDRESS				APT. NO.		CITY				CTY.		STATE		ZIP											
	503 OLYMPIC BLVD						SANTA MONICA						CA		90401-0000											
	RES. PHONE				BUS. PHONE				SOCIAL SECURITY NO.				DOB		AGE		SEX		RACE							
																	M		WHT BLK ASIA IND UNK							
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		
5' 11"		305 LBS		BRO		HAZ																				
PERSON N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																				
STREET ADDRESS				APT. NO.		CITY				CTY.		STATE		ZIP												
RES. PHONE				BUS. PHONE				SOCIAL SECURITY NO.				DOB		AGE		SEX		RACE								
																		WHT BLK ASIA IND UNK								
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE												
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.														
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE												
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.														
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR										
VALUE / DAMAGE EST.																										
SYNOPSIS																										
ON ABOVE DATE AND TIME I CAME INTO CONTACT WITH MR. COTA AFTER HE WAS OBSERVED SLEEPING ON THE SIDE OF A BUILDING. HE WAS RUN THROUGH NCIC AND RETURNED AS A MISSING INDIVIDUAL FROM THE CORONA CALIFORNIA POLICE DEPARTMENT. NIC# M512270415. A NCIC HIT WAS SENT FROM OUR AGENCY TO THE ENTERING AGENCY FOR REMOVAL. MR. COTA STATED HIS SISTER, WHO IS THE REPORTING PARTY CONSTANTLY REPORTS HIM MISSING SO SHE MAY FIND OUT HIS LOCATION AFTER HE IS LOCATED AS THERE IS AN ONGOING CIVIL SUIT BETWEEN THE TWO. MR. COTA WAS ULTIMATELY REMOVED FROM NCIC. AT THIS TIME THERE IS NO FURTHER INFORMATION AVAILABLE TO REPORT REGARDING THIS INCIDENT.																										
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."				YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."				COMPLAINANT / VICTIM CERTIFICATION SIGNATURE				X		DATE									
	REPORTING OFFICER (PRINT)				RANK		I.D. NO.		DATE		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO				I.D. NO		DATE									
	DEBACA, JOHN				POIII		6680		08/23/2015																	
	ASSISTING OFFICER (PRINT)				RANK		I.D. NO.		DATE		PROCESSED BY				DATE		DATA ENTRY PERSON		DATE							
APPROVING OFFICER (PRINT)				RANK		I.D. NO.		DATE		INCIDENT STATUS				EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE				DATE						
										ACTIVE INACT. CLOSED U.F. C.L.A. C.L.E.																
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)								CASES CLEARED BY THIS ARREST				CASE NO.				CASE NO.										
								CASE NO.																		

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-012508		STN# 09		PRIMAR																													
ON OR BETWEEN																																											
MM/DD/YY 08/23/2015		MM/DD/YY 08/23/2015		MM/DD/YY 08/24/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-012508		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																											
TIME 08:00		DAY OF WEEK SUN		TIME 18:00		DAY OF WEEK SUN		TIME 14:45		DAY OF WEEK MON		ADDRESS / LOCATION OF INCIDENT 63 LINCOLN AVE.--PLAZA				CITY SANTA FE		CTY. 01		ZIP 87501		GANG REL. YES NO		HATE / BIAS MOT. CODE																			
<div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">OFFENSE / INCIDENT</div>																STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING							
																1																											
																LOST/FOUND ITEM		SFPD-16		N		C		90Z		NO		NO		NO				25				UNK		UNK		UNK	
<div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)</div>																PERSON CODES		V-VICTIM		W-WITNESS		D-OTHER		TYPE CODES		I-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE							
																G-PARENT/GUARDIAN		C-CITED		D-DECEASED				I-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		M-APPARENT MINOR INJURY		B-BLACK		C-CHINESE		O-OTHER					
																R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/				B-BUSINESS		R-RELIGIOUS				I-POSSIBLE INTERNAL INJURY		O-OTHER MAJOR INJURY		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN					
																INTERVIEWED		A-ARRESTED		RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PUB				L-SEVERE LACERATION		T-LOSS OF TEETH		N-NONE		K-KOREAN		L-LATIN AMERICAN					
																PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																					
																STREET ADDRESS		APT. NO.		CITY								CTY.		STATE		ZIP											
																RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX				RACE		WHT		BLK		ASIA		IND		UNK			
																HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
																PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																					
																																STREET ADDRESS		APT. NO.		CITY							
RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX				RACE																		WHT		BLK		ASIA		IND		UNK			
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.																		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
PROPERTY STATUS 7		PROPERTY TYPE 25		TYPE OF ITEM PURSE		MAKE / BRAND UNK		MODEL		CALIBER		VALUE \$10.00		DRUG VALUE																													
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) 4"X5" BLACK WITH STRAP AND BUTTERFLY DE		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																															
																PROPERTY STATUS 7		PROPERTY TYPE 20		TYPE OF ITEM CURRENCY		MAKE / BRAND		MODEL		CALIBER		VALUE \$17.00		DRUG VALUE													
																SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.															
																YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BT											